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OCT-31-2006 10:30 OC1 3.1 5006

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| | Jo Anne | Cros | skey | | (Дерея | inor's hame) |
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| // | October | 31, | 2006 | | | (Date) |

| APPLICATION NO. | FILING DATE | FILST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/707,284 | 12/03/2003 | J. Scott Price | GEMS 0136 PUS | 1283 |

TITLE OF INVENTION: SEALED ELECTRON BEAM SOURCE

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| APPLN. TYPE | SMALL ENTITY | ISSUE FER DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | | |
| ponprovisional | NO | \$1400 | \$300 | 20 | \$1700 | 12/05/2006 | | |
| EXAMINER ART UNIT | | ART UNIT | CLASS-SUBCLASS | | | | | |
| KAO, CHIH CHENG G 2882 | | | 378-141000 | | | | | |
| 1. Change of corresponde CFR 1.363). | ence address or indication | n of "Fee Address" (37 | 2. For printing on the p | | 1 Deter T | Tra m = 3 | | |
| · | condence address (or Cha | age of Correspondence | (2) the name of a single firm (havinglas a member a 1112 120000014 910040 | | | | | |
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| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. | | | | | | | | |
| | | | listed, no name will be printed 22 FC: 1504 | | | | | |
| 3. ASSIGNEE NAME A | ND RESIDENCE DATA | A TO BE PRINTED ON | THE PATENT (print or typ | | | | | |
| PLEASE NOTE: Uni | less an assignee is ident h in 37 CFR 3.11. Com | ified below, no assigned | data will appear on the pa | stent. If an assignoe is id | entified below, the docu | iment has been filed for | | |
| (A) NAME OF ASSI | | | to data will appear on the patent. If an assignor is identified below, the document has been filed for OT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | |
| General E | lectric Compar | ıv | Schnectady | NY USA | | | | |
| | _ | | | | | | | |
| Please check the appropri | iate assignee category or | categories (will not be pr | inted on the patent): | Individual Corporation | on or other private group | entity Oovernment | | |
| 4a. The following [ee(s) | are submitted: | વા | o. Payment of Fee(9): ¡Pica | se iirst reapply any previ | ions જ સ્વાંહે જિલ્લામાં હેટ કહ્ય | ura abayah | | |
| Sissue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | A check is enclosed. | | | | | |
| | | | Payment by credit card, Form PTO-2038 is attached. | | | | | |
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| 5. Change in Entity Stat | tus (from status indicated | (shova) | | Trocodit (Tablec) O | (cold) (cold) | Aus copy of this form). | | |
| | S SMALL ENTITY Statu | | D. Applicant is no long | er claiming SMALL ENT | TTY status. See 37 CFR | 1.27(g)(2). | | |
| NOTE: The Issue Fee and interest as shown by the r | d Publication Fee (if requescripts of the United-Sta | niced) will not be accepted | d from amount other dear th | | | | | |
| Authorized Signature | Sol (9) | Shel | Date 10 30/06 | | | | | |
| Typed or printed name | John A. Art | z | Registration No. 25,824 | | | | | |

This collection of information is required by 37 CPR 1.311. The information is required to obtain or remin a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CPR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Parent and Timdemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria Virginia 22313-1450. Alexandria, Virginia 22313-1450.

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